2004-2005 Agency Plan

Housing Authority of the County of Butte



U.S. Department of Housing and Urban Development Office of Public and Indian Housing

PHA Plans

5 Year Plan for Fiscal Years 2000 - 2004 Annual Plan for Fiscal Year 2004

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

PHA Plan Agency Identification

PHA Name: Housing Authority of the County of Butte PHA Number: CA043 PHA Fiscal Year Beginning: (mm/yyyy) 10/2004 **Public Access to Information** Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) Main administrative office of the PHA PHA development management offices PHA local offices Display Locations For PHA Plans and Supporting Documents The PHA Plans (including attachments) are available for public inspection at: (select all that apply) Main administrative office of the PHA PHA development management offices PHA local offices Main administrative office of the local government Main administrative office of the County government Main administrative office of the State government Public library PHA website Other (list below) PHA Plan Supporting Documents are available for inspection at: (select all that apply) Main business office of the PHA PHA development management offices Other (list below)

5-YEAR PLAN PHA FISCAL YEARS 2000 - 2004

[24 CFR Part 903.5]

ΔΝ	Mission
State t	the PHA's mission for serving the needs of low-income, very low income, and extremely low-income is in the PHA's jurisdiction. (select one of the choices below)
	The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
\boxtimes	The PHA's mission is: (state mission here)
В. С	The mission of the Housing Authority of the County of Butte is to assist low and moderate-income residents to secure and maintain high quality affordable housing. Soals
The go empha identify PHAS REAC would	pals and objectives listed below are derived from HUD's strategic Goals and Objectives and those asized in recent legislation. PHAs may select any of these goals and objectives as their own, or yother goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN THING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS. (Quantifiable measures include targets such as: numbers of families served or PHAS scores achieved.) PHAs should yothese measures in the spaces to the right of or below the stated objectives.
HUD hous	Strategic Goal: Increase the availability of decent, safe, and affordable ing.
	PHA Goal: Expand the supply of assisted housing Objectives: Apply for additional rental vouchers: as available Reduce public housing vacancies: Leverage private or other public funds to create additional housing opportunities: \$110,000 Acquire or build units or developments Other (list below)
	PHA Goal: Improve the quality of assisted housing Objectives: Improve public housing management: (PHAS score) Improve voucher management: (SEMAP score) Increase customer satisfaction:

Concentrate on efforts to improve specific management functions: (list; e.g., public housing finance; voucher unit inspections)

Renovate or modernize public housing units: 10 Demolish or dispose of obsolete public housing: Provide replacement public housing: Provide replacement vouchers: Other: (list below)
PHA Goal: Increase assisted housing choices Dispectives: Provide voucher mobility counseling: Conduct outreach efforts to potential voucher landlords Increase voucher payment standards Implement voucher homeownership program: Implement public housing or other homeownership programs: Implement public housing site-based waiting lists: Convert public housing to vouchers: Other: (list below)
rategic Goal: Improve community quality of life and economic vitality
PHA Goal: Provide an improved living environment Dispectives: Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments: Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments: Implement public housing security improvements: Designate developments or buildings for particular resident groups (elderly, persons with disabilities) Other: (list below) mplement Broad Range of Income, work with TANF and others to provide
ob training and opportunities for economic self-sufficiency, continue with Capital Fund program in public housing to improve quality of life.
rategic Goal: Promote self-sufficiency and asset development of families lividuals
PHA Goal: Promote self-sufficiency and asset development of assisted olds Objectives: Increase the number and percentage of employed persons in assisted families: 25 Provide or attract supportive services to improve assistance recipients' employability: 5 supportive services

		Provide or attract supportive services to increase independence for the elderly or families with disabilities. Other: (list below)
HUD	Strateg	gic Goal: Ensure Equal Opportunity in Housing for all Americans
\boxtimes		Goal: Ensure equal opportunity and affirmatively further fair housing
	Objec	Undertake affirmative measures to ensure access to assisted housing
		regardless of race, color, religion national origin, sex, familial status, and disability: 5 workshops
	\boxtimes	Undertake affirmative measures to provide a suitable living environment
		for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability: Continuing to participate with the North Valley Property Owners Association
		Undertake affirmative measures to ensure accessible housing to persons
		with all varieties of disabilities regardless of unit size required: Other: (list below)

Other PHA Goals and Objectives: (list below)

In addition, the Housing Authority has developed the following Strategic Goals:

- 1. Streamline and/or conduct operations analysis for maintaining good customer service
 - a. Review operations to keep up with needs
 - b. Create and/or revise organizational chart
 - c. Evaluate office space and other space issues, including community space
 - d. Review hardware and software computer systems to keep up with program requirements and regulation changes.
 - e. Implement regulatory changes as they become effective
- 2. Implement and maintain quality affordable housing
 - a. Maintain program integrity in public housing and Section 8
 - b. Overcome negative perceptions of assisted housing
 - c. Develop self-sufficiency opportunities for participants
 - d. Maintain lease up in Farm Labor Housing
 - e. Look at opportunities for acquisition of non-HUD properties
 - f. Complete conversion to Voucher leases
 - g. Process incremental and special Voucher allocations
 - h. Develop resident groups for strong neighborhoods

- 3. Improve and maintain inter-agency cooperation
 - a. Continue to work with agencies to provide services
 - b. Seek to strengthen links between HACB and the County
 - c. Look at opportunities to increase participation between agencies for self-sufficiency activities, including child care and youth activities

Annual PHA Plan PHA Fiscal Year 2004

[24 CFR Part 903.7]

I.	Annual Plan Type:
Select	which type of Annual Plan the PHA will submit.
	Standard Plan
Strea	mlined Plan: High Performing PHA Small Agency (<250 Public Housing Units) Administering Section 8 Only
	Troubled Agency Plan

II. <u>Executive Summary of the Annual PHA Plan</u>

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

The Housing Authority of the County of Butte (HACB) is a high performing housing authority that operates Section 8, Public Housing, Farm Labor Housing and locally funded assisted housing.

As part of the Agency Plan process, the HACB has identified the following goals to meet over the next five (5) years:

- 1. Streamline and analyze operations
- 2. Implement and maintain quality affordable housing
- 3. Maintain and improve inter-agency cooperation

A discussion of the goals and objectives after completion of the first year of the Agency Plan can be found in the Attachments at "Goals and Objectives"

As part of the Agency Plan process, the HACB appointed a Resident Advisory Board, including recipients of Section 8 and Public Housing assistance. The Resident Advisory Board held two (2) meetings to review and comment on components of the Agency Plan. Comments from the residents at those meetings can be found in the Plan and in the Attachments.

The HACB is committed to working with other agencies, with the community and other partners in looking at the needs of its communities and funding opportunities to make these goals a reality.

III. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

Table of Contents

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Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Requi ⊠ ⊠ □	red Attachments: Admissions Policy for Deconcentration (Eligibility and Selection) FY 2004 Capital Fund Program Annual Statement
	Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)
Op	otional Attachments: PHA Management Organizational Chart
	FY 2004 Capital Fund Program 5 Year Action Plan Public Housing Drug Elimination Program (PHDEP) Plan

\boxtimes	Comments of Resident Advisory Board or Boards (must be attached if not
	included in PHA Plan text) (Resident Comments)
\boxtimes	Other (List below, providing each attachment name)
	Attachments regarding Eligibility and Selection, Rent Determination, Safety
	and Crime Prevention, Self-Sufficiency and Community Service, Home
	Ownership

Supporting Documents Available for ReviewIndicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review							
Applicable &	Supporting Document	Applicable Plan Component					
On Display	PHA Plan Certifications of Compliance with the PHA Plans	5 Year and Annual Plans					
X	and Related Regulations	J Teal and Annual Flans					
Х	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans					
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans					
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI))) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs					
Х	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;					
х	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies					
Х	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies					
Х	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 Quality Housing and Work Responsibility Act Initial Guidance; Notice and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies					
	Public housing rent determination policies, including the	Annual Plan: Rent					

List of Supporting Documents Available for Review							
Applicable &	Supporting Document	Applicable Plan Component					
On Display	months alology, for a otting much link according that your	Determination					
Χ	methodology for setting public housing flat rents check here if included in the public housing A & O Policy	Determination					
Х	Schedule of flat rents offered at each public housing development check here if included in the public housing A & O Policy	Annual Plan: Rent Determination					
Х	Section 8 rent determination (payment standard) policies check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination					
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance					
Х	Public housing grievance procedures check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures					
Х	Section 8 informal review and hearing procedures check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures					
Х	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs					
N/A	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs					
Х	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs					
N/A	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs					
N/A	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition					
Х	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing					
N/A	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing					
N/A	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership					
N/A	Policies governing any Section 8 Homeownership program check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership					
N/A	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency					
Х	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency					
Х	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency					

List of Supporting Documents Available for Review						
Applicable	Supporting Document	Applicable Plan				
&		Component				
On Display						
	The most recent Public Housing Drug Elimination Program	Annual Plan: Safety and				
N/A	(PHEDEP) semi-annual performance report for any open	Crime Prevention				
	grant and most recently submitted PHDEP application					
	(PHDEP Plan)					
	The most recent fiscal year audit of the PHA conducted under	Annual Plan: Annual				
X	section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C.	Audit				
	1437c(h)), the results of that audit and the PHA's response to					
	any findings					
N/A	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs				
	Other supporting documents (optional)	(specify as needed)				
	(list individually; use as many lines as necessary)					

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction							
by Family Type—Chico (11,821 families total)							
Family Type	Overall	Afford- ability	Supply	Quality	Access -ibility	Size	Loca- tion
Income <= 30% of AMI	1694	5	5	3	2	3	3
Income >30% but <=50% of AMI	1431	4	4	3	2	3	3
Income >50% but <80% of AMI	2036	3	3	2	2	2	2
Elderly	1660	4	4	3	4	3	2
Families with Disabilities	N/A						
White/Hispanic	9450						
American Indian/ Pacific Islander	181						
Asian	378						
Black	190						

Housing Needs of Families in the Jurisdiction							
by Family Type—Butte County (50,486 families total)							
Family Type	Overall	Afford -ability	Supply	Quality	Access -ibility	Size	Loca- tion
Income <= 30% of AMI	6752	5	5	4	2	3	3
Income >30% but <=50% of AMI	7473	4	4	3	2	3	3
Income >50% but <80% of AMI	8927	3	3	2	2	2	2
Elderly	11135	5	5	4	4	3	2
Families with Disabilities	N/A						
White/Hispanic	44270						
American Indian/ Pacific Islander	896						
Asian	1094						
Black	548						

	nade available for public inspection.)
Consolidated Plan of the Indicate year:	ne Jurisdiction/s
	Comprehensive Housing Affordability Strategy ("CHAS")
dataset	
American Housing Sur	vey data
Indicate year:	
Other housing market	study
Indicate year:	
Other sources: (list and	d indicate year of information)
Per the 2000 Census, inflate	ed by 1.5%

B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. Complete one table for each type of PHA-wide waiting list administered by the PHA. PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

HOUSING NEEDS OF FAMILIES ON THE WAITING LIST			
Waiting list type: (select on			
Section 8 tenant-bas	ed assistance		
Public Housing			
Combined Section 8			
		onal waiting list (optiona	ıl)
If used, identify whi	ch development/subjur		
	# of families	% of total families	Annual Turnover
Waiting list total	343		74
Extremely low income	198	58%	
<=30% AMI			
Very low income (>30%	109	32%	
but <50% AMI)			
Low income	36	10%	
(>50% but <80% AMI)			
Families with children	168	49%	
Elderly families	54	16%	
Families with Disabilities	121	35%	
White	199	58%	
Hispanic	66	19%	
Black	22	6%	
American Indian	7	2%	
Asian Pacific Islander	28	8%	
Other	0	0%	
Characteristics by Bedro	om Size (Public Hous	sing Only)	
0 BR	22	6%	
1BR	140	41%	
2 BR	133	39%	
3 BR	42	12%	
4 BR	2	1%	
5 BR	4	1%	
5+ BR	0	0%	
Is the waiting list closed (s	elect one)? 🛛 No 🗌	Yes	
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? No Yes			
Does the PHA permit specific categories of families onto the waiting list, even if			
generally closed? No Yes			

HOUSING NEEDS OF FAMILIES ON THE WAITING LIST			
<u> </u>	Waiting list type: (select one)		
Section 8 tenant-bas	sed assistance		
Public Housing			
Combined Section 8			
		onal waiting list (optional)
If used, identify whi	ch development/subjur		
	# of families	% of total families	Annual Turnover
Waiting list total	1,835		306
Extremely low income	1,266	69%	
<=30% AMI			
Very low income	569	31%	
(>30% but <50% AMI)			
Low income	N/A	N/A	
(>50% but <80% AMI)			
Families with children	918	50%	
Elderly families	205	11%	
Families with Disabilities	712	39%	
White	1,335	72%	
Hispanic	168	9%	
Black	112	6%	
American Indian	107	6%	
Asian/Pacific Islander	111	6%	
Other	2	1%	
Characteristics by Bedro	om Size (Public Hous	sing Only)	
0 BR			
1BR			
2 BR			
3 BR			
4 BR			
5 BR			
5+ BR			
Is the waiting list closed (s	elect one)? 🛛 No 🗌	Yes	
If yes:			
How long has it been closed (# of months)?			
Does the PHA expect to reopen the list in the PHA Plan year? ☐ No ☐ Yes			
Does the PHA permit specific categories of families onto the waiting list, even if			
generally closed?	☐ No ☐ Yes		

C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

(1) Strategies

NEED: SHORTAGE OF AFFORDABLE HOUSING FOR ALL ELIGIBLE POPULATIONS

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Select a	aii that apply
	Employ effective maintenance and management policies to minimize the number of public housing units off-line Reduce turnover time for vacated public housing units Reduce time to renovate public housing units Seek replacement of public housing units lost to the inventory through mixed finance development Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources Maintain or increase section 8 lease-up rates by establishing payment standards
	that will enable families to rent throughout the jurisdiction Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
	Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
	Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
	Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
	Other (list below)
	gy 2: Increase the number of affordable housing units by:
	Apply for additional section 8 units should they become available Leverage affordable housing resources in the community through the creation of mixed - finance housing Pursue housing resources other than public housing or Section 8 tenant-based assistance. Other: (list below)

NEED: SPECIFIC FAMILY TYPES: FAMILIES AT OR BELOW 30% OF MEDIAN

Strategy 1: Target available assistance to families at or below 30 % of AMI Select all that apply		
	Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance Employ admissions preferences aimed at families with economic hardships Adopt rent policies to support and encourage work Other: (list below)	
NEED:	SPECIFIC FAMILY TYPES: FAMILIES AT OR BELOW 50% OF MEDIAN	
	egy 1: Target available assistance to families at or below 50% of AMI	
Select	Employ admissions preferences aimed at families who are working Adopt rent policies to support and encourage work Other: (list below)	
NEED:	SPECIFIC FAMILY TYPES: THE ELDERLY	
	egy 1: Target available assistance to the elderly:	
	Seek designation of public housing for the elderly Apply for special-purpose vouchers targeted to the elderly, should they become available Other: (list below)	
NEED:	SPECIFIC FAMILY TYPES: FAMILIES WITH DISABILITIES	
Strategy 1: Target available assistance to Families with Disabilities: Select all that apply		
	Seek designation of public housing for families with disabilities Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing Apply for special-purpose vouchers targeted to families with disabilities, should they become available Affirmatively market to local non-profit agencies that assist families with disabilities Other: (list below)	

NEED: SPECIFIC FAMILY TYPES: RACES OR ETHNICITIES WITH DISPROPORTIONATE HOUSING NEEDS

Strate	egy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:		
Select i	f applicable		
	Affirmatively market to races/ethnicities shown to have disproportionate housing needs Other: (list below)		
Strate	gy 2: Conduct activities to affirmatively further fair housing		
Select a	all that apply		
\boxtimes	Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units		
\boxtimes	Market the section 8 program to owners outside of areas of poverty /minority concentrations		
	Other: (list below)		
Other	Housing Needs & Strategies: (list needs and strategies below)		
(2) Reasons for Selecting Strategies Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:			
	Funding constraints Staffing constraints Limited availability of sites for assisted housing Extent to which particular housing needs are met by other organizations in the community Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA Influence of the housing market on PHA programs Community priorities regarding housing assistance Results of consultation with local or state government Results of consultation with residents and the Resident Advisory Board Results of consultation with advocacy groups Other: (list below)		

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources:			
Sources Flamed Sou	Planned Sources and Uses Sources Planned \$ Planned Uses		
1. Federal Grants (FY 2004 grants)	Παιπισα ψ	Tidilliou Good	
a) Public Housing Operating Fund	143,541		
b) Public Housing Capital Fund	622,000		
c) HOPE VI Revitalization	0==,666		
d) HOPE VI Demolition			
e) Annual Contributions for Section 8 Tenant-Based Assistance	8,739,554		
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)			
g) Resident Opportunity and Self- Sufficiency Grants			
h) Community Development Block Grant			
i) HOME			
Other Federal Grants (list below)			
2. Prior Year Federal Grants (unobligated funds only) (list below)			
3. Public Housing Dwelling Rental Income	1,151,652	Operations	
4. Other income (list below)			
Interest Income	18,500	Operations	
Misc. Charges	20,000	1	
5. Non-federal sources (list below)			
Total resources	\$10,695,247		

3. PHA Policies Governing Eligibility, Selection, and Admissions [24 CFR Part 903.7 9 (c)]

A. Public Housing

(1) Fligibility

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

<u>,</u>	<u> </u>
a. Wh app 	en does the PHA verify eligibility for admission to public housing? (select all that bly) When families are within a certain number of being offered a unit: (state number) When families are within a certain time of being offered a unit: 3 months Other: (describe)
	ich non-income (screening) factors does the PHA use to establish eligibility for nission to public housing (select all that apply)? Criminal or Drug-related activity Rental history Housekeeping Other (describe)
c. 🖂	Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
d. 🖂	Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
e. 🗌	Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
(2) W	aiting List Organization
	ich methods does the PHA plan to use to organize its public housing waiting list lect all that apply) Community-wide list Sub-jurisdictional lists Site-based waiting lists Other (describe)
b. WI	nere may interested persons apply for admission to public housing? PHA main administrative office PHA development site management office Other (list below) PHA local office

	If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection (3) Assignment
,	1. How many site-based waiting lists will the PHA operate in the coming year?
2	2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)? If yes, how many lists?
(3. Yes No: May families be on more than one list simultaneously If yes, how many lists?
2	 4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)? PHA main administrative office All PHA development management offices Management offices at developments with site-based waiting lists At the development to which they would like to apply Other (list below)
<u>(3)</u>	Assignment
	How many vacant unit choices are applicants ordinarily given before they fall to the pottom of or are removed from the waiting list? (select one) One Two Three or More
b. [Yes No: Is this policy consistent across all waiting list types?
	 If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:
<u>(4)</u>	Admissions Preferences
	ncome targeting: Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?
	Fransfer policies: what circumstances will transfers take precedence over new admissions? (list below) Emergencies Overhoused Underhoused Medical justification

	Administrative reasons determined by the PHA (e.g., to permit modernization work)
	Resident choice: (state circumstances below) Other: (list below)
٠.	Preferences ✓ Yes No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection (5) Occupancy)
2.	Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)
Foi	rmer Federal preferences: Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden (rent is > 50 percent of income)
Oth	working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in the jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below)
the price thro to e	If the PHA will employ admissions preferences, please prioritize by placing a "1" in a space that represents your first priority, a "2" in the box representing your second prity, and so on. If you give equal weight to one or more of these choices (either bough an absolute hierarchy or through a point system), place the same number next each. That means you can use "1" more than once, "2" more than once, etc. within aking categories: Date and Time
Foi 1	rmer Federal preferences: Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Given equal weight Victims of domestic violence Substandard housing Homelessness

High rent burden

Worki Vetera Resid Those House Those progra	ences (select all that apply) ng families and those unable to work because of age or disability ans and veterans' families ents who live and/or work in the jurisdiction e enrolled currently in educational, training, or upward mobility programs cholds that contribute to meeting income goals (broad range of incomes) cholds that contribute to meeting income requirements (targeting) e previously enrolled in educational, training, or upward mobility ams as of reprisals or hate crimes preference(s) (list below)
☐ The P ☐ Not ap	hip of preferences to income targeting requirements: PHA applies preferences within income tiers oplicable: the pool of applicant families ensures that the PHA will meet te targeting requirements
(5) Occupar	ncy
about the The P The P PHA	rence materials can applicants and residents use to obtain information rules of occupancy of public housing (select all that apply) PHA-resident lease PHA's Admissions and (Continued) Occupancy policy priefing seminars or written materials source (list)
all that apply At an Any ti	annual reexamination and lease renewal me family composition changes nily request for revision
(6) Deconce	entration and Income Mixing
a. ☐ Yes ∑	No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?
b. 🗌 Yes 🛭	No: Did the PHA adopt any changes to its admissions policies based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If th	e answer to b was yes, what changes were adopted? (select all that apply) Adoption of site-based waiting lists If selected, list targeted developments below:
	Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments If selected, list targeted developments below:
	Employing new admission preferences at targeted developments If selected, list targeted developments below:
	Other (list policies and developments targeted below)
d. 🗌	Yes No: Did the PHA adopt any changes to other policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?
e. If the app	ne answer to d was yes, how would you describe these changes? (select all that lly)
	Additional affirmative marketing Actions to improve the marketability of certain developments Adoption or adjustment of ceiling rents for certain developments Adoption of rent incentives to encourage deconcentration of poverty and incomemixing Other (list below)
	sed on the results of the required analysis, in which developments will the PHA special efforts to attract or retain higher-income families? (select all that apply) Not applicable: results of analysis did not indicate a need for such efforts List (any applicable) developments below:
ma	sed on the results of the required analysis, in which developments will the PHA ake special efforts to assure access for lower-income families? (select all that ply)
αρ 	Not applicable: results of analysis did not indicate a need for such efforts List (any applicable) developments below:

B. Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

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111	 101	h	lity
	 		III V
,	 . 9	\sim 11	,

a. W	hat is the extent of screening conducted by the PHA? (select all that apply) Criminal or drug-related activity only to the extent required by law or regulation Criminal and drug-related activity, more extensively than required by law or regulation
	More general screening than criminal and drug-related activity (list factors below Other (list below)
b. 🖂	Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
c. 🗌	Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
d. 🗌	Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
	dicate what kinds of information you share with prospective landlords? (select all at apply)
	Criminal or drug-related activity
$\overline{\boxtimes}$	Other (describe below) Prior landlord name and address and telephone number if available
(2) W	aiting List Organization
as	ith which of the following program waiting lists is the section 8 tenant-based sistance waiting list merged? (select all that apply)
	None Federal public housing
	Federal moderate rehabilitation Federal project-based certificate program
	Other federal or local program (list below)
	here may interested persons apply for admission to section 8 tenant-based
-	sistance? (select all that apply) PHA main administrative office
\boxtimes	Other (list below) PHA local office
	FIIA IOCAI OIIICE

(3) Sea	arch Tim	<u>ıe</u>
a. 🛚	Yes 🗌	No: Does the PHA give extensions on standard 60-day period to search for a unit?
-		cumstances below: accommodation and to households actively searching for housing
(4) Adı	mission	s Preferences
a. Inco	ome targ	eting
	s ⊠ No ferences	Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?
		No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)
con		e following admission preferences does the PHA plan to employ in the r? (select all that apply from either former Federal preferences or other)
	Involunta Owner, I Victims o Substand Homeles	I preferences ary Displacement (Disaster, Government Action, Action of Housing naccessibility, Property Disposition) of domestic violence dard housing seness t burden (rent is > 50 percent of income)
	Working Veterans Residen Those en Househo Househo Those po Victims o	ces (select all that apply) families and those unable to work because of age or disability is and veterans' families its who live and/or work in your jurisdiction incolled currently in educational, training, or upward mobility programs olds that contribute to meeting income goals (broad range of incomes) olds that contribute to meeting income requirements (targeting) reviously enrolled in educational, training, or upward mobility programs of reprisals or hate crimes eference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.

Date and Time

Forme	er Federal preferences Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) given equal weight Victims of domestic violence Substandard housing Homelessness High rent burden
Other	preferences (select all that apply) Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in your jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below)
	nong applicants on the waiting list with equal preference status, how are plicants selected? (select one) Date and time of application Drawing (lottery) or other random choice technique
	he PHA plans to employ preferences for "residents who live and/or work in the sdiction" (select one) This preference has previously been reviewed and approved by HUD The PHA requests approval for this preference through this PHA Plan
6. Re □ ⊠	lationship of preferences to income targeting requirements: (select one) The PHA applies preferences within income tiers Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

10) Openia: Fulpedo Codicini o Alceletario e Frogramo
 a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply) The Section 8 Administrative Plan Briefing sessions and written materials Other (list below)
 b. How does the PHA announce the availability of any special-purpose section 8 programs to the public? Through published notices Other (list below)

4. PHA Rent Determination Policies [24 CFR Part 903.7 9 (d)]

Α.	Pι	ıbl	ic	Ho	us	ing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

(1) Income Based Rent Policies

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary s

(that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.
a. Use of discretionary policies: (select one)
The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))
or
The PHA employs discretionary policies for determining income-based rent (If selected, continue to question b.)
b. Minimum Rent
1. What amount best reflects the PHA's minimum rent? (select one) \$0 \$1-\$25 \$26-\$50
2. Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?
3. If yes to question 2, list these policies below:
c. Rents set at less than 30% than adjusted income
1. ☐ Yes ☐ No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?
If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:

	Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply) For the earned income of a previously unemployed household member For increases in earned income Fixed amount (other than general rent-setting policy) If yes, state amount/s and circumstances below: Fixed percentage (other than general rent-setting policy) If yes, state percentage/s and circumstances below: For household heads For other family members For transportation expenses For the non-reimbursed medical expenses of non-disabled or non-elderly families Other (describe below)
е.	Ceiling rents
1.	Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)
	Yes for all developments Yes but only for some developments No
2.	For which kinds of developments are ceiling rents in place? (select all that apply)
	For all developments For all general occupancy developments (not elderly or disabled or elderly only) For specified general occupancy developments For certain parts of developments; e.g., the high-rise portion
	For certain size units; e.g., larger bedroom sizes Other (list below)
3.	For certain size units; e.g., larger bedroom sizes

 Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply) Never At family option 				
Any time the family experiences an income increase Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold) Other (list below)				
g. Yes No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?				
(2) Flat Rents				
 In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.) The section 8 rent reasonableness study of comparable housing Survey of rents listed in local newspaper Survey of similar unassisted units in the neighborhood Other (list/describe below) 				
B. Section 8 Tenant-Based Assistance Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complet sub-component 4B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).				
(1) Payment Standards				
Describe the voucher payment standards and policies.				
 a. What is the PHA's payment standard? (select the category that best describes your standard) At or above 90% but below100% of FMR 100% of FMR Above 100% but at or below 110% of FMR Above 110% of FMR (if HUD approved; describe circumstances below) 				

f. Rent re-determinations:

	he payment standard is lower than FMR, why has the PHA selected this ndard? (select all that apply)
	FMRs are adequate to ensure success among assisted families in the PHA's
	segment of the FMR area The PHA has chosen to serve additional families by lowering the payment
	standard Reflects market or submarket
	Other (list below)
	ne payment standard is higher than FMR, why has the PHA chosen this level? lect all that apply)
	FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
	Reflects market or submarket
	To increase housing options for families Other (list below)
d. Ho □ ⊠	ow often are payment standards reevaluated for adequacy? (select one) Annually
	Other (list below) As needed to ensure continued leasing capability—approximately every 6 months
	nat factors will the PHA consider in its assessment of the adequacy of its payment ndard? (select all that apply)
	Success rates of assisted families Rent burdens of assisted families
	Other (list below)
<u>(2) Mi</u>	nimum Rent
a. Wh	nat amount best reflects the PHA's minimum rent? (select one) \$0
	\$1-\$25 \$26-\$50
b. 🗌	Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

5. Operation	is and	Manage	ement
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[24 CFR Part 903.7 9 (e)]
Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

N/A High Performing PHA

A. PHA Management Structur	e		
Describe the PHA's management struc	ture and organization.		
(select one)			
An organization chart sho	wing the PHA's management	structure and	
organization is attached.			
A brief description of the	management structure and or	ganization of the PHA	
follows:			
B. HUD Programs Under PHA	Management		
List Federal programs administered	d by the PHA, number of families se	rved at the beginning of the	
	d turnover in each. (Use "NA" to ind	icate that the PHA does not	
operate any of the programs listed	,	I –	
Program Name	Units or Families Served	Expected	
	at Year Beginning	Turnover	
Public Housing			
Section 8 Vouchers			
Section 8 Certificates			
Section 8 Mod Rehab			
Special Purpose Section 8			
Certificates/Vouchers (list			
individually)			
Public Housing Drug			
Elimination Program (PHDEP)			
Other Federal Programs(list			
individually)			
C. Management and Maintena	ince Policies		
List the PHA's public housing manager			
that contain the Agency's rules, standards, and policies that govern maintenance and management of			
public housing, including a description			
infestation (which includes cockroach infestation) and the policies governing Section 8 management.			

(1) Public Housing Maintenance and Management: (list below) N/A

(2) Section 8 Management: (list below) N/A

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]
Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

N/A High Performing PHA

 A. Public Housing 1. ☐ Yes ☒ No: Has the PHA established any written grievance procedure addition to federal requirements found at 24 CFR Part 9 B, for residents of public housing? 	
If yes, list additions to federal requirements below:	
 Which PHA office should residents or applicants to public housing contact the PHA grievance process? (select all that apply) PHA main administrative office PHA development management offices Other (list below) 	ct to initiate
 B. Section 8 Tenant-Based Assistance 1. ☐ Yes ☒ No: Has the PHA established informal review procedures for to the Section 8 tenant-based assistance program and in hearing procedures for families assisted by the Section based assistance program in addition to federal requires found at 24 CFR 982? 	informal 8 tenant-
If yes, list additions to federal requirements below:	
 Which PHA office should applicants or assisted families contact to initiate informal review and informal hearing processes? (select all that apply) PHA main administrative office Other (list below) 	e the

7. C	apital	Improvement Needs
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[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Selec	t one: The Capital Fund Program Annual Statement is provided as an attachment to		
	the PHA Plan at Attachment (state name) Capital Fund		
-or-			
	The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)		
(2) Optional 5-Year Action Plan			
be con	ies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can inpleted by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan ite OR by completing and attaching a properly updated HUD-52834.		
a. 🔀	Yes No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)		
:	yes to question a, select one:		
	The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name Capital Fund		
-or-			
	The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)		

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

Yes ⊠		to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary) b) Status of HOPE VI revitalization grant (complete one set of questions for each grant)
		Development (project) number:
		Development (project) number: Status of grant: (select the statement that best describes the current
		status)
		Revitalization Plan under development
		Revitalization Plan submitted, pending approval Revitalization Plan approved
		Activities pursuant to an approved Revitalization Plan underway
Yes 🖂	No:	c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?If yes, list development name/s below:
Yes 🗌	No:	d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:
		used mixed financing, such as tax credits in the past and will lookes in the next 5 years.
Yes 🛚	No:	 e) Will the PHA be conducting any other public housing developmen or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)] Applicability of component 8: Section 8 only PHAs are not required to complete this section. 1. Yes No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to component 9: if "yes", complete one activity description for each development.) 2. Activity Description—N/A ☐ Yes ☐ No: Has the PHA provided the activities description information in the optional Public Housing Asset Management Table? (If "yes", skip to component 9. If "No", complete the Activity Description table below.) **Demolition/Disposition Activity Description** 1a. Development name: 1b. Development (project) number: 2. Activity type: Demolition Disposition 3. Application status (select one) Approved \square Submitted, pending approval Planned application 4. Date application approved, submitted, or planned for submission: (DD/MM/YY) 5. Number of units affected: 6. Coverage of action (select one) Part of the development Total development 7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities[24 CFR Part 903.7 9 (i)] Exemptions from Component 9; Section 8 only PHAs are not required to complete this section. 1. Yes No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "No", skip to component 10. If "yes", complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.) 2. Activity Description—N/A ☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? If "yes", skip to component 10. If "No", complete the Activity Description table below. **Designation of Public Housing Activity Description** 1a. Development name: Winston Gardens 1b. Development (project) number: 043-010 2. Designation type: Occupancy by only the elderly Occupancy by families with disabilities Occupancy by only elderly families and families with disabilities 3. Application status (select one) Approved; included in the PHA's Designation Plan ⊠ Submitted, pending approval Planned application 4. Date this designation approved, submitted, or planned for submission: 8/1/1982 5. If approved, will this designation constitute a (select one) N/A New Designation Plan Revision of a previously-approved Designation Plan? N/A 6. Number of units affected: 62 7. Coverage of action (select one) Part of the development Total development

10. Conversion of Public Housing to Tenant-Based Assistance [24 CFR Part 903.7 9 (j)] Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

	f Reasonable Revitalization Pursuant to section 202 of the HUD Appropriations Act
1. ☐ Yes ⊠ No:	Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If "No", skip to component 11; if "yes", complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)
2. Activity Description	on— N/A
☐ Yes ☐ No:	Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? If "yes", skip to component 11. If "No", complete the Activity Description table below.
C	onversion of Public Housing Activity Description
1a. Development nam	
1b. Development (pro	
☐ Assessme ☐ Assessme ☐ Assessme	of the required assessment? nt underway nt results submitted to HUD nt results approved by HUD (if marked, proceed to next question) lain below)
	a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)
4. Status of Conversion Conversion Conversion Conversion	on Plan (select the statement that best describes the current status) n Plan in development n Plan submitted to HUD on: (DD/MM/YYYY) n Plan approved by HUD on: (DD/MM/YYYY) bursuant to HUD-approved Conversion Plan underway
	requirements of Section 202 are being satisfied by means other than
conversion (select one	
Units addr	essed in a pending or approved demolition application (date submitted or approved:
_	essed in a pending or approved HOPE VI demolition application (date submitted or approved:)
Units addr	essed in a pending or approved HOPE VI Revitalization Plan (date submitted or approved:)
☐ Requireme	ents no longer applicable: vacancy rates are less than 10 percent ents no longer applicable: site now has less than 300 units scribe below)

B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937
C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937

11. Homeownership Programs Administered by the PHA [24 CFR Part 903.7 9 (k)]

A. Public Housing	
	onent 11A: Section 8 only PHAs are not required to complete 11A.
1. ☐ Yes ⊠ No:	Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If "No", skip to component 11B; if "yes", complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to small PHA or high performing PHA status. PHAs completing streamlined submissions may skip to component 11B.)
2. Activity Descripti ☐ Yes ☐ No:	on— N/A Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? (If "yes", skip to component 12. If "No", complete the Activity Description table below.)
	Housing Homeownership Activity Description mplete one for each development affected)
1a. Development na	
1b. Development (p	roject) number:
2. Federal Program HOPE I 5(h) Turnkey Section 3	
3. Application status Approved Submitte	
4. Date Homeowne	rship Plan/Program approved, submitted, or planned for
submission: (DD/M	
5. Number of units	
	ion: (select one)
Part of the deve	·
Total developm	ent

B. Section 8 Tenant Based Assistance 1. Yes No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. High performing PHAs may skip to component 12.) 2. Program Description: a. Size of Program Yes No: Will the PHA limit the number of families participating in the section 8 homeownership option? If the answer to the question above was yes, which statement best describes the number of participants? (select one) 25 or fewer participants 26 - 50 participants 51 to 100 participants more than 100 participants b. PHA-established eligibility criteria

Yes No: Will the PHA's program have eligibility criteria for participation in its

criteria?

If yes, list criteria below:

Section 8 Homeownership Option program in addition to HUD

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (I)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

N/A—High Performing PHA, See Attachments

A. PHA Coordination with the Welfare (TANF) Agency

Cooperative Yes ⊠ No	e agreements: b: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?
	If yes, what was the date that agreement was signed? DD/MM/YY
☐ Client re☐ Informa	tion sharing regarding mutual clients (for rent determinations and
progran	se) nate the provision of specific social and self-sufficiency services and ns to eligible families administer programs
Partner Joint ac	to administer a HUD Welfare-to-Work voucher program Iministration of other demonstration program describe)
B. Services	and programs offered to residents and participants
<u>(1) Gen</u>	<u>eral</u>
Which, enhanc followin F F F F F F F	Sufficiency Policies if any of the following discretionary policies will the PHA employ to e the economic and social self-sufficiency of assisted families in the g areas? (select all that apply) Public housing rent determination policies Public housing admissions policies Section 8 admissions policies Preference in admission to section 8 for certain public housing families Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA Preference/eligibility for public housing homeownership option
	participation Preference/eligibility for section 8 homeownership option participation Other policies (list below) nomic and Social self-sufficiency programs

Yes □ No:	Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-
	component 2, Family Self Sufficiency Programs. The position
	of the table may be altered to facilitate its use.)

	Serv	ices and Progra	ms	
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Section 3 Program (Chico, Oroville, Gridley, Biggs)	1	Residents	PHA Main Office	Public Housing
Tenant Based Rental Assistance (TBRA)	12	Referrals	Various Social Services	Section 8
Rehabilitation of our Friends (ROOF)	10	Referrals	Butte Behavioral Health	Section 8
Adult System of Care (ASOC)	12	Specific criteria	CA Department of Mental Health/ Department of Behavioral Health	Both
Partnership with Behavioral Health (FOREST)	1	Specific criteria	CA Department of Mental Health/ Department of Behavioral Health	Both
After school homework and tutoring program for persons in Farm Labor Housing	30-40	Specific criteria	PHA	Both

(2) Family Self Sufficiency program/s

a. Participation Description

·	Family Self Sufficiency (FSS) Participa	tion
Program	Required Number of Participants (start of FY 2002 Estimate)	Actual Number of Participants (As of: DD/MM/YY)
Public Housing	0	0
Section 8	30	23 (01/01/04)

o. 🗌 Yes 🔀 No:	If the PHA is not maintaining the minimum program size required
	by HUD, does the most recent FSS Action Plan address the steps
	the PHA plans to take to achieve at least the minimum program
	size? If no, list steps the PHA will take below:

As of April 2002, there are approximately 11 graduates from the FSS programs, which will bring the number of required participants down to 39.

C. Welfare Benefit Reductions

D. Re	Other: (list below) served for Community Service Requirement pursuant to section 12(c) of the
	agencies regarding the exchange of information and coordination of services Establishing a protocol for exchange of information with all appropriate TANF agencies
	reexamination. Establishing or pursuing a cooperative agreement with all appropriate TANF
\boxtimes	policies and train staff to carry out those policies Informing residents of new policy on admission and reexamination Actively notifying residents of new policy at times in addition to admission and
	using Act of 1937 (relating to the treatment of income changes resulting from fare program requirements) by: (select all that apply) Adopting appropriate changes to the PHA's public housing rent determination
	e PHA is complying with the statutory requirements of section 12(d) of the U.S.

[24 CFR 960.603, et seq]

INTRODUCTION

In order to be eligible for continued occupancy, each adult family member must either (1) contribute eight (8) hours per month of community service (not including political activities), or (2) participate in an economic self-sufficiency program unless they are exempt from this requirement.

EXEMPTIONS

The following adult family members of tenant families are exempt from this requirement:

- A. Family members who are 62 or older.
- B. Family members who are blind or disabled.
- C. Family members who are the primary care giver for someone who is blind or disabled.
- D. Family members engaged in work activity.
- E. Family members who are exempt from work activity under Part A Title IV of the Social Security Act or under any other State welfare program, including the welfare-to-work program.

F. Family members receiving assistance under a State program funded under Part A Title IV of the Social Security Act or under any other State welfare program, including welfare-to-work and who are in compliance with that program.

NOTIFICATION OF THE REQUIREMENT

The HACB shall notify all such family members of the community service requirement and of the categories of individuals who are exempt from the requirement. The notification will provide the opportunity for family members to claim and explain an exempt status. The HACB shall verify such claims.

The notification will advise families that their community service obligation will begin upon the effective date of their first annual reexamination on or after 10/1/03. For family's paying a flat rent, the obligation begins on the date their annual reexamination would have been effective had an annual reexamination taken place. It will also advise them that failure to comply with the community service requirement will result in ineligibility for continued occupancy at the time of any subsequent annual reexamination.

VOLUNTEER OPPORTUNITIES

Community service includes performing work or duties in the public benefit that serve to improve the quality of life and/or enhance resident self-sufficiency, and/or increase the self-responsibility of the resident within the community.

An economic self-sufficiency program is one that is designed to encourage, assist, train or facilitate the economic independence of participants and their families or to provide work for participants. These programs may include programs for job training, work placement, basic skills training, education, English proficiency, work fare, financial or household management, apprenticeship, and any program necessary to ready a participant to work (such as substance abuse or mental health treatment).

The HACB will create partnerships with public and private agencies to make opportunities available to residents. It may be necessary to contract with a third party to administer the entire community service program.

Together with the resident advisory councils, the HACB may create volunteer positions such as litter patrols, and supervising and record keeping for volunteers.

THE PROCESS

At the first annual reexamination on or after October 1, 2004, and each annual reexamination thereafter, the HACB will do the following:

A. Provide a list of volunteer opportunities to the family members.

- B. Provide information about obtaining suitable volunteer positions.
- C. Provide a volunteer time sheet to the family member. Instructions for the time sheet require the individual to complete the form and have a supervisor date and sign for each period of work.
- D. Thirty (30) days before the family's next lease anniversary date, HACB staff or the contractor volunteer coordinator will advise the HACB whether each applicable adult family member is in compliance with the community service requirement.

NOTIFICATION OF NON-COMPLIANCE WITH COMMUNITY SERVICE REQUIREMENT

The HACB will notify any family found to be in noncompliance of the following:

- A. The family member(s) has been determined to be in noncompliance;
- B. That the determination is subject to the grievance procedure; and
- C. That, unless the family member(s) enter into an agreement to comply, the lease will not be renewed or will be terminated.

OPPORTUNITY FOR CURE

The HACB will offer the family member(s) the opportunity to enter into an agreement prior to the anniversary of the lease. The agreement shall state that the family member(s) agrees to enter into an economic self-sufficiency program or agrees to contribute to community service for as many hours as needed to comply with the requirement over the past 12-month period. Both the head of the household and the family member shall sign the agreement. The cure shall occur over the 12-month period beginning with the date of the agreement and the resident shall at the same time stay current with that year's community service requirement. The first hours a resident earns goes toward the current commitment until the current year's commitment is made.

The volunteer coordinator will assist the family member in identifying volunteer opportunities and will track compliance on a monthly basis.

If any applicable family member does not accept the terms of the agreement, does not fulfill their obligation to participate in an economic self-sufficiency program, or falls behind in their obligation under the agreement to perform community service by more than three (3) hours after three (3) months, the HACB shall take action to terminate the lease.

13. PHA Safety and Crime Prevention Measures N/A

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

A. Need for measures to ensure the safety of public housing residents

	scribe the need for measures to ensure the safety of public housing residents ect all that apply) High incidence of violent and/or drug-related crime in some or all of the PHA's developments High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments Residents fearful for their safety and/or the safety of their children Observed lower-level crime, vandalism and/or graffiti People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime Other (describe below)
	nat information or data did the PHA used to determine the need for PHA actions improve safety of residents (select all that apply).
	Safety and security survey of residents Analysis of crime statistics over time for crimes committed "in and around" public housing authority Analysis of cost trends over time for repair of vandalism and removal of graffiti Resident reports PHA employee reports Police reports Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs Other (describe below)
3. Wh	nich developments are most affected? (list below)
	ime and Drug Prevention activities the PHA has undertaken or plans to take in the next PHA fiscal year
	t the crime prevention activities the PHA has undertaken or plans to undertake: t all that apply) Contracting with outside and/or resident organizations for the provision of crime-and/or drug-prevention activities Crime Prevention Through Environmental Design Activities targeted to at-risk youth, adults, or seniors Volunteer Resident Patrol/Block Watchers Program Other (describe below)

2. Which developments are most affected? (list below)

C. Coordination between PHA and the police

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)
Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan
Police provide crime data to housing authority staff for analysis and action
Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)
Police regularly testify in and otherwise support eviction cases
Police regularly meet with the PHA management and residents
Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services
Other activities (list below)
Which developments are most affected? (list below)
D. Additional information as required by PHDEP/PHDEP Plan
PHAs eligible for FY 2001 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.
Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?
☐ Yes ☐ No: Has the PHA included the PHDEP Plan for FY 2001 in this PHA Plan?
Yes No: This PHDEP Plan is an Attachment. (Attachment Filename:)

14. PET POLICY

[24 CFR Part 903.7 9 (n)]

EXCLUSIONS

This policy does not apply to animals that are used to assist persons with disabilities. Assistance animals are allowed in all public housing facilities with no restrictions other than those imposed on all tenants to maintain their units and associated facilities in a decent, safe, and sanitary manner and to refrain from disturbing their neighbors.

PETS IN HOUSING AUTHORITY-OWNED BUILDINGS

The HACB will allow for pet ownership upon pre-approved and completion of the Pet Agreement, Authorization for Pet Ownership form, and the tenant's compliance with the terms of the Pet Policy and Agreement, including payment of pet deposit.

APPROVAL

Residents must have the prior approval of the HACB before moving a pet into their unit. Residents must request approval on the Authorization for Pet Ownership Form that must be fully completed before the HACB will approve the request.

Tenants must sign a "Pet Agreement" and will pay the required pet security deposit at the time the agreement is signed.

Types and Number of Pets

The HACB will allow only domesticated dogs, cats, birds, rodents and fish in aquariums in units. No exotic pets (such as snakes, iguanas, etc.) or farm-type animals (including potbelly pigs, rabbits and chickens) will be allowed.

Only one (1) cat or one (1) dog per unit allowed. Domestic birds must be caged at all times inside the dwelling unit and may not exceed two (2) in number. One aquarium, not-to-exceed 25 gallons, will be permitted. The aquarium must be well maintained to prevent an unsanitary or unsafe condition or damages.

Any animal deemed to be potentially harmful to the health or safety of others, including attack or fight trained dogs, will not be allowed.

No animal when fully grown may exceed twenty-five (25) pounds in weight or measure more than 20" in height (floor to shoulders).

INOCULATIONS/NEUTER OR SPAYED

In order to be approved, pets must be appropriately inoculated against rabies and other conditions prescribed by local ordinances. Inoculations must be kept current. (Presently 1st rabies (dog or cat) is good for 1 year. Thereafter, every 3 years.) <u>All dogs and cats must be spayed or neutered</u>.

PET DEPOSIT

A pet deposit is required at the time of pre-approval for and signing of pet agreement. The pet deposit will be \$300 for cinder block construction housing and \$600 for all other family housing. The deposit is refundable when the pet or the family vacate the unit, less any amounts owed due to damage beyond normal wear and tear.

FINANCIAL OBLIGATION OF RESIDENTS

Any resident who owns or keeps a pet in their dwelling unit will be required to pay for any damages caused by the pet both during occupancy and upon vacating. Also, any pet-related insect infestation in the pet owner's unit will be the financial responsibility of the pet owner and the HACB reserves the right to exterminate and charge the resident.

NUISANCE OR THREAT TO HEALTH OR SAFETY

The pet and its living quarters must be maintained in a manner to prevent odors and any other unsanitary conditions in the owner's unit and surrounding areas.

Repeated substantiated complaints by neighbors or HACB personnel regarding pets disturbing the peace of neighbors through noise, odor, animal waste, or other nuisance will result in the owner having to remove the pet or move him/herself.

DESIGNATION OF PET AREAS

Pets must be kept in the owner's dwelling unit or on a leash at all times when outside (no outdoor cages or tether may be used). Pets may not be allowed to run loose in yards. Pets will be allowed only in designated areas on the grounds of the projects. Pet owners must immediately clean up after their pets and are responsible for disposing of pet waste. Litter box contents may not be disposed of by depositing into toilet. Any plumbing problems resulting from such activity will be charged to the tenant. Repeated violations may result in lease termination.

VISITING PETS

Pets that meet the size and type criteria outlined above may visit the projects/buildings where pets are allowed for up to two weeks without HACB approval. Tenants who have visiting pets must abide by the conditions of this policy regarding health, sanitation, nuisances, leashing, and peaceful enjoyment of others.

If visiting pets violate this policy or cause the tenant to violate the lease, the tenant will be required to remove the visiting pet.

DESIGNATION OF RESPONSIBLE PARTY (EMERGENCY CAREGIVER)

Any resident seeking approval under this policy must designate an individual not living in the unit as a responsible party for the pet. Name, address, and telephone number of this emergency caregiver must be on file with the Housing Authority. This person must assume responsibility for the pet in the absence of the pet owner. A signed certification on file with the Housing Authority from the emergency caregiver is required indicating their willingness and acceptance of the responsibilities as an emergency caregiver. Any changes in emergency caregiver must be reported by the pet owner and kept current at all times.

REMOVAL OF PETS

The HACB, or an appropriate community authority, shall require the removal of any pet from a project if the pet's conduct or condition is determined by the HACB or community authority to be a nuisance or threat to the health and/or safety of other occupants of the project, of other persons in the community where the project is located, or any other violation of this policy.

In the event of illness or death of a pet owner, or in the case of an emergency which would prevent the pet owner from properly caring for the pet, the Housing Authority will contact the emergency caregiver designated by the resident or the local pet law enforcement agency to take the pet and care for it until the family or friends would claim the pet and assume responsibility for it. If the authorized caregiver is not available or is unable or unwilling to take responsibility of the pet, the Housing Authority will contact the local pet law enforcement agency to take the pet pursuant to State law. Any expenses incurred will be the responsibility of the pet owner.

15. Civil Rights Certifications [24 CFR Part 903.7 9 (o)]
Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit [24 CFR Part 903.7 9 (p)] 1. ☑ Yes ☐ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U S.C. 1437c(h))? (If no, skip to component 17.) 2. ☑ Yes ☐ No: Was the most recent fiscal audit submitted to HUD? 3. ☐ Yes ☑ No: Were there any findings as the result of that audit? 4. ☐ Yes ☐ No: If there were any findings, do any remain unresolved? If yes, how many unresolved findings remain? _____ 5. ☐ Yes ☐ No: Have responses to any unresolved findings been submitted to HUD? If not, when are they due (state below)?

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

N/A—High Performing PHA			
1. Yes No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have not been addressed elsewhere in this PHA Plan?			
 2. What types of asset management activities will the PHA undertake? (select all that apply) Not applicable Private management Development-based accounting Comprehensive stock assessment Other: (list below) 			
3. Yes No: Has the PHA included descriptions of asset management activities in			

the optional Public Housing Asset Management Table?

18. Other Information [24 CFR Part 903.7 9 (r)]

A. Re	esident Adviso	ry Board Recommendations			
1. 🖂		d the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?			
2. If y ⊠ □	If yes, the comments are: (if comments were received, the PHA MUST select one) Attached at Attachment (File name) Resident Comments Provided below:				
3. In □	necessary. The PHA changed portions of the PHA Plan in response to comments				
	List changes be HACB provide FY2004 Other: (list below)	ed greater level of detail regarding accomplishments from			
B. De	escription of E	lection process for Residents on the PHA Board			
1. 🗌	Yes ⊠ No:	Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)			
2. 🗌	Yes ⊠ No:	Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to subcomponent C.)			
	mination of cand Candidates we Candidates co	sident Election Process didates for place on the ballot: (select all that apply) ere nominated by resident and assisted family organizations ould be nominated by any adult recipient of PHA assistance on: Candidates registered with the PHA and requested a place on oe)			
b. Eli	Any head of he Any adult recip	s: (select one) of PHA assistance ousehold receiving PHA assistance oient of PHA assistance nber of a resident or assisted family organization			

 c. Eligible voters: (select all that apply) All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance) Representatives of all PHA resident and assisted family organizations Other (list)
C. Statement of Consistency with the Consolidated Plan For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).
1. Consolidated Plan jurisdiction: State of California, City of Chico
 2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply) \(\text{Normal The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s. \(\text{Normal The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan. \(\text{Normal The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan. \(\text{Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below) \(\text{Other: (list below)} \)
 The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)
The State Department of Housing and Community Development (HCD) encourages the HACB to submit suggestions, improvements, and additional objectives for consideration in the State Consolidated Plan updates. HCD also solicits information and feedback from PHA's such as public responses to the PHA plans. This collaboration of housing needs of HACB provides HCD with a means of sharing solutions to similar problems among the agencies in its jurisdictions.
The HACB assists in meeting the goals of the Consolidated Plan of Chico through both its input into the Consolidated Plan process, as well as in the following:
 Operating a family self-sufficiency program Working with the City in preserving at risk affordable housing developments where possible
D. Other Information Required by HUD
Use this section to provide any additional information requested by HUD.

Attachments

Update of Goals and Objectives and Performance to date:

HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing			
HACB Goal	Objectives	Progress to date	
Expand the supply of assisted housing	 Apply for additional vouchers as they become are available Leverage private or other public funds to create additional housing opportunities: \$110,000 	 No additional fair share vouchers are available this year. Received 18 preservation vouchers this year. The Authority has entered into a contract with AHDC to construct 100+ elderly Tax Credit units. 	
		The Authority has contracts with the City and County for tenant based rental assistance programs using City and County funds. The HACB is managing these programs assisting approximately 45 people.	
		The Authority is working with Butte County Community Action Agency to develop 34-units to expand an existing transitional family shelter. The City of Chico has provided funding. The HACB will provide rental assistance application to previously homeless families who graduate from the Esplanade House.	
Improve the quality of assisted housing	Renovate or modernize public housing units: 10 in Gridley	The Authority used capital funds in public housing to improve the quality of life for 26 units by continuing rehabbing the old units in Chico.	

HUD Strategic Goal: Improve community quality of life and economic vitality			
HACB Goal	Objectives	Progress to date	
Provide an improved living environment	 Implement Broad Range of Income, work with TANF and others to provide job training and opportunities for economic self- sufficiency, continue with Capital Fund program in public housing to improve quality of life. 	 The Authority is selecting applicants above the HUD requirement of 40% and will continue to select to income above 30% AMI until a broad range of income is achieved. The Authority will enforce lease requirements to provide safe neighborhoods. 	
		et development of families and individuals	
HACB Goal	Objectives	Progress to date	
Promote self- sufficiency and asset development of assisted households	 Increase the number and percentage of employed persons in assisted families: 25 Provide or attract supportive services to improve assistance recipients' employability: 5 supportive services 	 61% of families in Section 8 and 84% in Public Housing, excluding elderly are working. 40 families work with supportive services such as: ARC, Touchstone, Independent Living, TBRA and Catholic Social Services. The FSS supervisor monitors files on a monthly basis and more frequently as appropriate. The HACB has an internship program and PIC placements. The Authority will continue to achieve the goals of providing job training and opportunities for economic self-sufficiency. 	

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans			
HACB Goal	Objectives Progress to date		
Ensure equal opportunity and affirmatively further fair housing	Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability: 5 workshops	The Authority cooperates with the City to provide assistance to individuals referred through local service agencies and has a contract with Butte County Behavioral Health to facilitate affordable housing payments.	
	Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability: Continuing to participate with the North Valley Property Owners Association	 The City of Chico co-sponsors North Valley Property Owners Association and Legal Services, community-wide workshops for landlords and tenants. 2 briefing workshops were held within the last year: 1 in August and 1 in September. Staff attended several North Valley Property Owners Association meetings and Fair Housing workshops to promote suitable living environments and continues to attend on a regular basis. 	

Other HACB Goals and Objectives			
HACB Goal	Objectives	Progress to date	
Streamline and/or conduct operations analysis for maintaining good customer service	 Objectives Review operations to keep up with needs Create and/or revise organizational chart Evaluate office space and other space issues, including community space Review hardware and software computer systems to keep up with program requirements and regulation changes. Implement regulatory changes as they become effective 	 Staff meets 2 times per month to review operational needs and incorporate regulatory changes. The Authority is reviewing organizational needs and has begun discussion for revised staffing. Proposed organizational chart has been discussed with employees and Board of Commissioners. Authorization has been given by the Board to add the position of Housing Director. The Board of Commissioners has approved the construction of a larger administrative building designed for needs of HA. Construction began in late 2003 and will be completed in mid 2004. Review of computer systems is progressing. The upgraded system will be ready before mid 2004 with corresponding improvements to offices. 	

Other HACB Goals and Objectives				
HACB Goal	Objectives	Progress to date		
Implement and maintain quality affordable housing	 Maintain program integrity in public housing and Section 8 	 FLH has maintained a wait list all year and filled vacancies with qualified families. 		
nousing	 Overcome negative perceptions of assisted housing Develop self-sufficiency opportunities for participants Maintain lease up in Farm Labor Housing Look at opportunities for acquisition of non-HUD properties Process incremental and special Voucher allocations Develop resident groups for strong neighborhoods 	 Vouchers were leased at 100%. Authority has began a joint project to provide vouchers for project based units for homeless/disabled families in Chico 		

Other HACB Goals and Objectives			
HACB Goal Objectives Progress to date			
Improve and maintain interagency cooperation	 Continue to work with agencies to provide services Seek to strengthen links between HACB and the County Look at opportunities to increase participation between agencies for self-sufficiency activities, including child care and youth activities 	 See strategic goal regarding serving 25 families through social services See strategic goals regarding equal opportunity 	
Improve Communication with Residents	 Provide tenants with information about maintenance, repair and modernization activities. Provided detailed information about location of gas, water shut offs, air filters, dangers of and procedures to prohibit and/or eliminate mold and mildew. Decrease language and cultural barriers with southeast Asian residents (predominately Hmong) who count for 15% of residents in Public Housing. 	 Increased staff time meeting with residents. Meet at each development annually to discuss goals and concerns of the HACB and residents. Provide written housekeeping tips to prohibit and/or eliminate mold and mildew. Schedule meeting with Hmong Counsel and clan leaders. Provide training to employees to improve professional skills. Hired full-time employee who speaks Hmong. Conducted outreach with Hmong clients to determine the need for and how to provide services. Contracted with Language Line Services to provide support to staff when a client speaks a language not familiar to staff. 	

De-concentration Analysis

Component 3, (6) Deconcentration and Income Mixing

a. X Yes No:	Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question.
b. Yes No:	Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments			
Development Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)((iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]

Resident Comments

Residents had the following comments regarding the Agency Plan:

Under Capital Fund, residents had no additional comments. *The Agency will address already identified issues, as funds become available.*

Under Public Housing – Admissions and Continued Occupancy, staff is implementing written notification to every family regarding resident's selection of calculated versus flat rent.

Under Section 8 Administrative Plan, staff recommends amending the wording to match the HAP contract "All vouchers that are issued are subject to funding availability". Residents expressed concern regarding the future funding of this program by Congress.

In addition to the Resident Advisory Board (RAB), the HACB held meetings regarding the Capital Fund. Three meetings were held at three different on-site locations.

OROVILLE PUBLIC MEETING

There were no substantive comments regarding this year's use of funds. Residents stated that, in the future, they were interested in expansion of the washer/dryer room, new roofs, replacement of the HVAC units, interior and exterior lighting, replacement of refrigerators, phone lines in all the rooms, and addition of tenant parking signs. Winston Garden residents would like to have ADA-type toilets and Oro Dam residents would like playground equipment.

GRIDLEY AND BIGGS MEETING

There were no substantive comments regarding this year's use of funds. Residents stated that, in the future, they were interested in playground equipment, basketball courts, additional off street parking, landscaping, community building and larger storage buildings. Removal of pantry walls and new HVAC units, along with fencing were also discussed.

CHICO MEETING

There were no substantive comments regarding this year's use of funds. Residents stated that, in the future, they were interested in a community/daycare building in Chico and playground equipment at older cinder block homes. Also discussed: fencing around front yards, screen doors, window replacement and washers/dryers inside homes at Rhodes Terrace; and speed bumps at the entrance of La Lieta Court and Natoma Court. Also discussed, was new flooring and exterior lighting.

Criteria for Substantial Deviation and Significant Amendments to the Agency Plan

SUBSTANTIAL DEVIATION FROM 5-YEAR PLAN:

A substantial deviation from the 5-Year Plan is defined as a reduction of more than 25% in the goals and objectives over the 5-Year period, or a change of 2 or more indicators (needs and/or strategies), or a change to, addition or elimination of, one of the Agency's goals.

SIGNIFICANT AMENDMENT OR MODIFICATION TO THE ANNUAL PLAN:

A significant amendment or modification to the Annual Plan is defined as an amendment that would require the approval of the Housing Commission in order to implement, i.e. a change to Eligibility and/or Occupancy requirements, a change in goals or strategy, a substantial change (more than 25%) in the goals and objectives.

CAPITAL FUND TABLES START ON THE NEXT PAGE

Annual	Statement/Performance and Evaluation Report				
Capital	Fund Program and Capital Fund Program Replaceme	ent Housing Factor	(CFP/CFPRHA)	Part 1: Summary	
PHA Name (Grant Type and Numb	er:		Federal FY of Grant:
	Housing Authority of the County of Butte	Capital Fund Program	Grant No: CA 30 PO4	350102	2002
		Replacement Housing	g Factor Grant No:		
[] Origina	al Annual Statement [] Reserve for Disas	sters/Emergencies	[]	Revised Annual Statem	ent/Revision Number _
[X] Perfo	rmance and Evaluation Report for Program Year Ending 2004		[] Final Performa	nce and Evaluation Rep	oort
		Total Esti	mate Cost	Total Ac	tual Cost
Line No.	Summary by Development Account	Original	Revised	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations				
3	1408 Management Improvements - Soft Cost	28,000	28,000		3,245
4	1410 Administration	75,000	75,000		64,722
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	114,979	71,343		51,343
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	592,035	663,136		447,168
11	1465.1 Dwelling Equipment - Non expendable	24,465			
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	5,500	2,500		550
18	1499 Development Activities				
19	1502 Contingency				
20	Amount of Annual Grant (Sum of lines 2-18)	839,979	839,979	0	567,028
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 19 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security - Soft Cost				
24	Amount of line 20 Related to Security - Hard Cost				
25	Amount of line 20 Related to Energy Conservation Measures				
26	Collateralization Expenses or Debt Service			ļ	
	Signature of Executive Director & Date:	Signature of Public Housi	ing Director & Date:		

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

Part 11: Supporting Pages

PHA Name				Grant Type and	Number:			Federal FY of Grant:
Housing Authority of the County of Butte			Capital Fund Program Grant No: CA 30 PO4350102				2002	
			Replacement Housing Factor Grant No:					
Development Development				Total Estimated Cost Total Actual Cost				
Number/Name Ha-Wide Activities	General Description of Major Work Categories	Account Number	Quantity	Original	Revised	Funds Obligated	Funds Expended	Status of Work
	Š		,	ŭ		<u> </u>		
CA43-1A, 1B & 4	A. Roof & soffit replacement	1460			0		0	
16 & 4	B. Kitchen remodel	1460			0		0	
	C. Bathroom remodel	1460			0		0	
	D. Appliance/HVAC Replacement	1465.1			0		0	
	E. Window Replacement	1460			0		0	
	F. Ceiling/Wall Repaint (LBP)	1460			0		0	
	G. Electrical Upgrade	1460			0		0	
	H. Waterheater replacement, etc.	1460			0		0	
	I. Interior Door/Closets repair	1460			0		0	
	J. Utility room renovation/addition	1460			0		0	
	K. Site work, etc.	1450			0		0	
	L. Gutters, etc.	1460			0		0	
			-					
			Total	0	0	0	0	

Annual Statement/Performance and Evaluation Report

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA) Part 11: Supporting Pages

PHA Name				Grant Type and Number:				Federal FY of Grant:
Housing Authority of the County of Butte				Capital Fund Program Grant No: CA 30 PO4350102 Replacement Housing Factor Grant No:				2002
Number/Name Ha-Wide Activities	General Description of Major Work Categories	Account Number	Quantity	Original	Revised	Funds Obligated	Funds Expended	
CA43-3,	A. Roof & soffit replacement	1460	10	105,437			85,810	
	B. Kitchen remodel	1460	10	298,815			37,646	
	C. Bathroom remodel	1460	10	23,249			20,920	
	D. Appliance/HVAC Replacement	1465.1	10	8,588			7,725	
	E. Window Replacement	1460	10	34,039			27,985	
	F. Ceiling/Wall Repaint (LBP)	1460	10	13,532			12,175	
	G. Electrical Upgrade	1460	10	50,007			39,705	
	H. Waterheater replacement, etc.	1460	10	5,292			4,760	
	I. Interior Door/Closets repair	1460	10	8,810			7,925	
	J. Utility room renovation/addition	1460	10	45,245			38,070	
	K. Site work, etc.	1450	10	16,436			14,790	
	L. Gutters, etc.	1460	10	7,050			6,345	
			Total	616,500	0	0	303,856	

PHA Name	hority of the County of Butte			Grant Type and		· CA 20 DO425	0102	Federal FY of Grant: 2002
riousing Aut	nonty of the County of Butte			1 -	ogram Grant No		0102	2002
Development		Development		Replacement Housing Factor Grant No: Total Estimated Cost Total Actual Cost			tual Cost	
Number/Name Ha-Wide Activities	General Description of Major Work Categories	Account Number	Quantity	Original	Revised	Funds Obligated	Funds Expended	Status of Work
CA43-2A & 2B	A. Roof & soffit replacement	1460	0		0		0	
& 2B	B. Kitchen remodel	1460	0		0		0	
	C. Bathroom remodel	1460	0		0		0	
	D. Appliance/HVAC Replacement	1465.1	0		0		0	
	E. Window Replacement	1460	0		0		0	
	F. Ceiling/Wall Repaint (LBP)	1460	0		0		0	
	G. Electrical Upgrade	1460	0		0		0	
	H. Waterheater replacement, etc.	1460	0		0		0	
	I. Interior Door/Closets repair	1460	0		0		0	
	J. Utility room renovation/addition	1460	0		0		0	
	K. Site work, etc.	1450	0		0		0	
	L. Gutters, etc.	1460	0		0		0	
			Total	0	0	0	0	

PHA Name				Grant Type and	l Number:			Federal FY of Grant:
Housing Aut	nority of the County of Butte			Capital Fund Pr	ogram Grant No	: CA 30 PO435	0102	2002
_	•			Replacement H	ousing Factor G	rant No:		
Development		Development		Total Estin			tual Cost	
Number/Name	General Description of Major	Account				Funds	Funds	1
Ha-Wide Activities	Work Categories	Number	Quantity	Original	Revised	Obligated	Expended	Status of Work
CA43,	M. Management Improvements	1408		15,000			3,245	
AUTH.	Computer/Office Equip			13,000				
WIDE	N. Administration	1410		75,000			52,694	
	O. Fees/Permits Architect, LBP Testing	1430		114,979			45,556	
	P. Resident Relocation	1495.1		5,500			324	
	Q. Nondwelling Equipment	1475					0	
	R. Replacement Reserve	1490				0	0	
	S. Contingency	1502				0	0	
			Total	223,479	0	0	101,819	

PHA Nam	ne	Grant Type and Number	r:		Federal FY of Grant:
	Housing Authority of the County of Butte	Capital Fund Program Gr	ant No: CA 30 PO4350	1-03	2003
		Replacement Housing Fa	actor Grant No:		
[] Origina	I Annual Statement [] Reserve for Disast	ters/Emergencies	[]Re	evised Annual Statemen	t/Revision Number
[X] Perfo	rmance and Evaluation Report for Program Year Ending 2004		[] Final Performance	and Evaluation Report	
		Total Estim	nate Cost	Total Ac	tual Cost
Line No.	Summary by Development Account	Original	Revised	Obligated	Expended
1	Total Non-CGP Funds				
2	1406 Operations				
3	1408 Management Improvements - Soft Cost	7,000			
4	1410 Administration	67,000			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement	10,000			
10	1460 Dwelling Structures	454,995			
11	1465.1 Dwelling Equipment - Non expendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	132,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingency				
20	Amount of Annual Grant (Sum of lines 2-18)	670,995	0	0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 19 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security - Soft Cost				
24	Amount of line 20 Related to Security - Hard Cost				
25	Amount of line 20 Related to Energy Conservation Measures				
26	Collateralization Expenses or Debt Service				
	Signature of Executive Director & Date:	Signature of Public Housing	Director & Date:		

Annual State	ement/Performance and Evalu	uation Repo	rt					
Capital Fund	Program and Capital Fund Prog	gram Replac	ement Ho	ousing Factor ((CFP/CFPR	HA) Part 1	1: Support	ing Pages
PHA Name				Grant Type and				Federal FY of Grant:
Housing Aut	hority of the County of Butte			Capital Fund Pr	ogram Grant No	o: CA 30 PO43	501-03	2003
				Replacement H				
Development		Development		Total Estim	ated Cost		tual Cost	
Number/Name Ha-Wide Activities	General Description of Major Work Categories	Account Number	Quantity	Original	Revised	Funds Obligated	Funds Expended	Status of Work
ia-viae Activities	vvoik categories	Number	Quartity	Original	Nevisea	Obligated	Experiaca	Clatus of Work
CA43-1A,	A. Roof & soffit replacement	1460			0		0	
1B & 4								
	B. Kitchen remodel	1460			0		0	
	C. Bathroom remodel	1460			0		0	
	D. Appliance/HVAC Replacement	1465.1			0		0	
	F. Window Donlocoment	1460			0		0	
	E. Window Replacement	1400			0		0	
	F. Ceiling/Wall Repaint (LBP)	1460			0		0	
	G. Electrical Upgrade	1460			0		0	
	H. Waterheater replacement, etc.	1460			0		0	
	I. Interior Door/Closets repair	1460			0		0	
	J. Utility room renovation/addition	1460			0		0	
	K. Site work, etc.	1450			0		0	
	IN. OILE WOIK, ELC.	1430			U		0	
	L. Gutters, etc.	1460			0		0	
			Total	0	0	0	0	

PHA Name	· (4 0 · (D)			Grant Type and		Federal FY of Grant:		
Housing Auth	nority of the County of Butte			Capital Fund Pr	2003			
					ousing Factor G			
Development	0 15	Development		Total Estimated Cost		Total Ac		4
Number/Name	General Description of Major	Account Number	Ougatitus	Original	Dovised	Funds Obligated	Funds Expended	Chatria of Morle
Ha-Wide Activities	Work Categories	Number	Quantity	Original	Revised	Obligated	Expended	Status of Work
		4.400	_					
	A. Roof & soffit replacement	1460	0		0		0	
& 2B								
	B. Kitchen remodel	1460	0		0		0	
	C. Bathroom remodel	1460	0		0		0	
	e. Balliooni remodel	1 100	J		ŭ		J	
	D. A	1465.1	0		0		0	
	D. Appliance/HVAC Replacement	1405.1	U		U		U	
		4.400	•				•	
	E. Window Replacement	1460	0		0		0	
	F. Ceiling/Wall Repaint (LBP)	1460	0		0		0	
	G. Electrical Upgrade	1460	0		0		0	
	1.5							
	H. Waterheater replacement, etc.	1460	0		0		0	
	Ti. Waterneater replacement, etc.	1400	O		o l		O	
		1400	0		0		0	
	I. Interior Door/Closets repair	1460	0		0		0	
	J. Utility room renovation/addition	1460	0		0		0	
	K. Site work, etc.	1450	0		0		0	
	L. Gutters, etc.	1460	0		0		0	
			•					
			Total	_			•	
			Iotal	0	0	0	0	

PHA Name				Grant Type and	Number:			Federal FY of Grant:
Housing Aut	hority of the County of Butte			Capital Fund Pro	gram Grant No:	CA 30 PO4350	01-03	2003
				Replacement Ho	using Factor Gr	ant No:		
Development		Development		Total Estim	nated Cost		tual Cost	
Number/Name	General Description of Major	Account	_			Funds	Funds	
Ha-Wide Activities	Work Categories	Number	Quantity	Original	Revised	Obligated	Expended	Status of Work
CA43-3,	A. Roof & soffit replacement	1460	6	80,433				
	B. Kitchen remodel	1460	6	201,501				
	C. Bathroom remodel	1460	6	17,040				
	D. Appliance/HVAC Replacement	1465.1	6	6,543				
	E. Window Replacement	1460	6	29,201				
	F. Ceiling/Wall Repaint (LBP)	1460	6	8,590				
	G. Electrical Upgrade	1460	6	49,882				
	H. Waterheater replacement, etc.	1460	6	3,467				
	I. Interior Door/Closets repair	1460	6	6,077				
	J. Utility room renovation/addition	1460	6	37,049				
	K. Site work, etc.	1450	6	23,711				
	L. Gutters, etc.	1460	6	1,500				
			Total	464,995	0	0	0	

PHA Name				Grant Type and	d Number:			Federal FY of Grant:
Housing Aut	nority of the County of Butte			Capital Fund Pr	ogram Grant No	: CA 30 PO435	501-03	2003
				Replacement H	ousing Factor G			
Development		Development			nated Cost			
Number/Name	General Description of Major	Account				Funds	Funds	
Ha-Wide Activities	Work Categories	Number	Quantity	Original	Revised	Obligated	Expended	Status of Work
		1406						
	M. Operations	1406						
	M. Management Improvements	1408		7,000				
AUTH.								
WIDE	N. Administration	1410		67,000				
	O. Fees/Permits Architect, LBP Testing	1430						
	P. Resident Relocation	1495.1		0			0	
	1. Resident Relocation	1400.1					O	
	O. Novel office For toward	1475		122.000			0	
	Q. Nondwelling Equipment	1475		132,000			U	
		4.400					•	
	R. Replacement Reserve	1490				0	0	
	S. Contingency	1502				0	0	
			Total	206,000	0	0	0	

PHA Nam	ne	Grant Type and Number	r:		Federal FY of Grant:	
	Housing Authority of the County of Butte	Capital Fund Program Gr	ant No: CA 30 PO4350	2-03	2003	
		Replacement Housing Fa	actor Grant No:			
[X] Origin	nal Annual Statement [] Reserve for Disa	sters/Emergencies	[] F	Revised Annual Stateme	nt/Revision Number	
[] Perfor	mance and Evaluation Report for Program Year Ending 2004		[] Final Performance a	and Evaluation Report		
		Total Estim	nate Cost	Total Ac	Actual Cost	
Line No.	Summary by Development Account	Original	Revised	Obligated	Expended	
1	Total Non-CGP Funds					
2	1406 Operations					
3	1408 Management Improvements - Soft Cost	10,727				
4	1410 Administration					
5	1411 Audit					
6	1415 Liquidated Damages					
7	1430 Fees and Costs					
8	1440 Site Acquisition					
9	1450 Site Improvement					
10	1460 Dwelling Structures	92,418				
11	1465.1 Dwelling Equipment - Non expendable	5,582				
12	1470 Nondwelling Structures					
13	1475 Nondwelling Equipment	25,000				
14	1485 Demolition					
15	1490 Replacement Reserve					
16	1492 Moving to Work Demonstration					
17	1495.1 Relocation Costs					
18	1499 Development Activities					
19	1502 Contingency					
20	Amount of Annual Grant (Sum of lines 2-18)	133,727	0	0	0	
21	Amount of line 20 Related to LBP Activities					
22	Amount of line 19 Related to Section 504 Compliance					
23	Amount of line 20 Related to Security - Soft Cost					
24	Amount of line 20 Related to Security - Hard Cost					
25	Amount of line 20 Related to Energy Conservation Measures					
26	Collateralization Expenses or Debt Service					
	Signature of Executive Director & Date:	Signature of Public Housing	Director & Date:			

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

Part 11: Supporting Pages

PHA Name				Grant Type and	Number:			Federal FY of Grant:
Housing Aut	hority of the County of Butte			Capital Fund Prog	1-03	2003		
				Replacement Hou	using Factor Gra	nt No:		
Development		Development		Total Estim	Total Ac			
Number/Name Ha-Wide Activities	General Description of Major Work Categories	Account Number	Quantity	Original	Revised	Funds Obligated	Funds Expended	Status of Work
CA43-1A, 1B & 4	A. Roof & soffit replacement	1460	2	7,562	0		0	
10 0 4	B. Kitchen remodel	1460	2	42,365	0		0	
	C. Bathroom remodel	1460	2	6,289	0		0	
	D. Appliance/HVAC Replacement	1465.1	2	2,181	0		0	
	E. Window Replacement	1460	2	9,733	0		0	
	F. Ceiling/Wall Repaint (LBP)	1460	2	1,256	0		0	
	G. Electrical Upgrade	1460	2	13,128	0		0	
	H. Waterheater replacement, etc.	1460	2	358	0		0	
	I. Interior Door/Closets repair	1460	2	985	0		0	
	J. Utility room renovation/addition	1460	2	3,210	0		0	
	K. Site work, etc.	1450	2	5,101	0		0	
	L. Gutters, etc.	1460	2	250	0		0	
			Tatal	00.440		•		
			Total	92,418	0	0	0	

Annual State	ement/Performance and Evalu	uation Repo	rt					
Capital Fund	Program and Capital Fund Prog	gram Replac	ement Ho	ousing Factor	(CFP/CFPR	HA) Part 1	11: Support	ing Pages
PHA Name				Grant Type and	Number:			Federal FY of Grant:
	hority of the County of Butte			Capital Fund Pr		o: CA30 PO40	3501-03	2003
				Replacement H				
Development		Development		Total Estim			tual Cost	
Number/Name	General Description of Major	Account		0		Funds	Funds	0
la-Wide Activities	Work Categories	Number	Quantity	Original	Revised	Obligated	Expended	Status of Work
CA43-3,	A. Roof & soffit replacement	1460						
	B. Kitchen remodel	1460						
	C. Bathroom remodel	1460						
	D. Appliance/HVAC Replacement	1465.1		5,582				
	E. Window Replacement	1460						
	F. Ceiling/Wall Repaint (LBP)	1460						
	G. Electrical Upgrade	1460						
	H. Waterheater replacement, etc.	1460						
	I. Interior Door/Closets repair	1460						
	J. Utility room renovation/addition	1460						
	K. Site work, etc.	1450						
	L. Gutters, etc.	1460						
					_		_	
			Total	5,582	0	0	0	

PHA Name			Grant Type and	Federal FY of Grant:				
Housing Aut	hority of the County of Butte			Capital Fund Pr	ogram Grant No:	: CA 30 PO435	601-03	2003
				Replacement H	ousing Factor Gr	ant No:		
Development		Development		Total Estimated Cost		Total Actual Cost		
Number/Name Ha-Wide Activities	General Description of Major Work Categories	Account Number	Quantity	Original	Revised	Funds Obligated	Funds Expended	Status of Work
CA43-2A & 2B	A. Roof & soffit replacement	1460	0		0		0	
α 2.5	B. Kitchen remodel	1460	0		0		0	
	C. Bathroom remodel	1460	0		0		0	
	D. Appliance/HVAC Replacement	1465.1	0		0		0	
	E. Window Replacement	1460	0		0		0	
	F. Ceiling/Wall Repaint (LBP)	1460	0		0		0	
	G. Electrical Upgrade	1460	0		0		0	
	H. Waterheater replacement, etc.	1460	0		0		0	
	I. Interior Door/Closets repair	1460	0		0		0	
	J. Utility room renovation/addition	1460	0		0		0	
	K. Site work, etc.	1450	0		0		0	
	L. Gutters, etc.	1460	0		0		0	
			Total	0	0	0	0	

PHA Name				Grant Type and	d Number:			Federal FY of Grant:
Housing Aut	hority of the County of Butte			Capital Fund Pr	ogram Grant No	: CA 30 PO435	01-03	2003
5	,			Replacement H				
Development	ı	Development			nated Cost	Total Ac	tual Cost	
Number/Name	General Description of Major	Account				Funds	Funds	1
Ha-Wide Activities		Number	Quantity	Original	Revised	Obligated	Expended	Status of Work
	M. Operations	1406						
	·							
CA43,	M. Management Improvements	1408		10,727				
	ivi. Management improvements	1400		10,727				
AUTH.								
WIDE	N. Administration	1410						
	O. Fees/Permits Architect, LBP Testing	1430						
	O. 1 ccs/1 cmiles / trofficedt, EDI - resting	1 100						
		4.405.4					0	
	P. Resident Relocation	1495.1					0	
	Q. Nondwelling Equipment	1475		25,000			0	
				·				
	R. Replacement Reserve	1490				0	0	
	R. Replacement Reserve	1430					U	
	S. Contingency	1502				0	0	
			Total	35,727	0	0	0	

PHA Nam	ne .	Grant Type and Number	·r·		Federal FY of Grant:
i i ii ti taiii	Housing Authority of the County of Butte	Capital Fund Program G		N1-∩ <i>4</i>	2004
	Trodoing Additionly of the County of Date	Replacement Housing F		71-04	2004
[] Origina	al Annual Statement [] Reserve for Disas			Pavisad Annual Statemer	nt/Revision Number _1_
	mance and Evaluation Report for Program Year Ending 2004	sters/Emergencies	[] Final Performance		itirevision ramber _1_
[]1 chon	Thanks and Evaluation Report for Frogram Fear Ending 2004	Total Estir			tual Cost
Line No.	Summary by Development Account	Original	Revised	Obligated	Expended
1	Total Non-CGP Funds	Original	Reviseu	Obligated	Experided
2					
3	1406 Operations	25,000			
4	1408 Management Improvements - Soft Cost	77,707			
5	1410 Administration	11,101			
6	1411 Audit				
7	1415 Liquidated Damages	28,000			
8	1430 Fees and Costs	20,000			
9	1440 Site Acquisition	10,000			
10	1450 Site Improvement	610,371			
11	1460 Dwelling Structures				
	1465.1 Dwelling Equipment - Non expendable	6,000			
12	1470 Nondwelling Structures	45.000			
13	1475 Nondwelling Equipment	15,000			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration	5.000			
17	1495.1 Relocation Costs	5,000			
18	1499 Development Activities				
19	1502 Contingency	777.070	•		
20	Amount of Annual Grant (Sum of lines 2-18)	777,078	0	0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 19 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security - Soft Cost				
24	Amount of line 20 Related to Security - Hard Cost				
25	Amount of line 20 Related to Energy Conservation Measures				
26	Collateralization Expenses or Debt Service				
	Signature of Executive Director & Date:	Signature of Public Housing	Director & Date:		

Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHA)

Part 11: Supporting Pages

PHA Name				Grant Type and	Number:		Federal FY of Grant:	
Housing Aut	hority of the County of Butte			Capital Fund Pro	gram Grant No:	2004		
	,			Replacement Ho	_			
Development	Development Development			Total Estimated Cost Total Actual			tual Cost	1
Number/Name	General Description of Major	Account				Funds	Funds	
Ha-Wide Activities	Work Categories	Number	Quantity	Original	Revised	Obligated	Expended	Status of Work
CA43-4	A. Roof & soffit replacement	1460	8	102,256			0	
	B. Kitchen remodel	1460	8	126,002			0	
	C. Bathroom remodel	1460	8	5,632	0		0	
	D. Appliance/HVAC Replacement	1465.1	8	68,934	0		0	
	E. Window Replacement	1460	8	6,525	0		0	
	F. Ceiling/Wall Repaint (LBP)	1460	8	33,658	0		0	
	G. Electrical Upgrade	1460	8	16,859	0		0	
	H. Waterheater replacement, etc.	1460	8	856	0		0	
	I. Interior Door/Closets repair	1460	8	36,985	0		0	
	J. Utility room renovation/addition	1460	8	895	0		0	
	K. Site work, etc.	1450	8	23,895	0		0	
	L. Gutters, etc.	1460	8	2,874	0		0	
			Total	425,371	0	0	0	

PHA Name				Grant Type and	Number:			Federal FY of Grant:
Housing Aut	hority of the County of Butte			Capital Fund Pro	gram Grant No:	01-04	2004	
	•			Replacement Ho				
Development		Development					tual Cost	
Number/Name	General Description of Major	Account				Funds	Funds	
Ha-Wide Activities	Work Categories	Number	Quantity	Original	Revised	Obligated	Expended	Status of Work
044040	E 14% D	1460	00	26 000				
CA43-13,	E. Window Replacement	1460	90	36,000				
			Total	36,000	0	0	0	

PHA Name			Grant Type and	d Number:	Federal FY of Grant:			
Housing Auth	nority of the County of Butte			Capital Fund Pr			501-04	2004
				Replacement H				
Development		Development		Total Estimated Cost Total Act				
Number/Name Ha-Wide Activities	General Description of Major Work Categories	Account Number	Quantity	Original	Revised	Funds Obligated	Funds Expended	Status of Work
CA43-10	A: Replace HVAC Units	1460	30	165,000	0		0	
			0		0		0	
			0		0		0	
			0		0		0	
			0		0		0	
			0		0		0	
			0		0		0	
			0		0		0	
			0		0		0	
			0		0		0	
			0		0		0	
			0		0		0	
			Total	165,000	0	0	0	

PHA Name	Grant Type and	l Number:		Federal FY of Grant:				
Housing Aut	hority of the County of Butte			Capital Fund Pr	ogram Grant No	501-04	2004	
9	, , , , , , , , , , , , , , , , , , , ,			Replacement H				
Development	I I	Development			nated Cost		tual Cost	
Number/Name	General Description of Major	Account				Funds	Funds	1
Ha-Wide Activities	Work Categories	Number	Quantity	Original	Revised	Obligated	Expended	Status of Work
		4.400						
	M. Operations	1406						
CA43,	M. Management Improvements	1408		25,000				
AUTH.								
WIDE	N. Administration	1410		77,707				
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	O. Fees/Permits Architect, LBP Testing	1430		28,000				
	O. Fees/Femilis Architect, LBF Testing	1430		20,000				
		4 405 4		F 000				
	P. Resident Relocation	1495.1		5,000				
	Q. Nondwelling Equipment	1475		15,000				
	R. Replacement Reserve	1490						
	S. Contingency	1502						
	G. Commigency	.002						
			Total	150 707	0		_	
			rotal	150,707	U	l ol	l 0	
			Total	150,707	0	0	0	

HA Name:				[] Original 5-Year Plan	
Housing Authority of the Cour	nty of Butte			[] Revision No:	
A: Development Number/Name	Year 1	Work Statement for Year 2 FFY Grant: 501-05 PHA FY: 2005	Work Statement for Year 3 FFY Grant: 501-06 PHA FY: 2006	Work Statement for Year 4 FFY Grant: 501-07 PHA FY: 2007	Work Statement for Year 5 FFY Grant: 501-08 PHA FY: 2008
CA 043-1A, 1B, 4		235,168	235,247	195,000	277,562
CA 043-2A, 2B		0	0	0	67,000
CA 043-3	See Annual	371,584	384,980	310,099	308,000
CA 043-10	Statement	0	0	126,000	382,500
CA 043-13		36,000	0	153,250	93,000
CA 043-14		0	15,000	0	24,500
CA 043-15		0	0	0	92,000
HA-WIDE		288,824	236,600	86,022	49,522
Total CFP Funds Est.		931,576	871,827	870,371	1,294,084
Total Replacement		84,520			
Housing Factor Funds					

Activities for Year 1	FFY Grant: CA 30 PO 43501-05 FFY Grant: CA 30 PO 43501-06 PHA FY: 2005 PHA FY: 2006					
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description o Major Work Categories	f Quantity	Estimated Cost
	CA 043-1A, 1B, 4			CA 043-1A, 1B, 4		
	A: Roof & Soffit Replacement	5	53,660	A: Roof & Soffit Replacement	5	53,660
See Annual	B: Kitchen Remodel	5	74,762	B: Kitchen Remodel	5	74,762
	C: Bathroom Remodel	5	4,187	C: Bathroom Remodel	5	4,187
	D: HVAC Replacement	5	44,485	D: HVAC Replacement	5	44,485
	E: Window Replacement	5	5,411	E: Window Replacement	5	5,411
	F: Ceiling/Wall Repair (LBP)	5	18,326	F: Ceiling/Wall Repair (LBP)	5	18,326
	G: Electrical Upgrade	5	13,738	G: Electrical Upgrade	5	13,738
	H: Waterheater Replacement, etc.	5	682	H: Waterheater Replacement, etc.	5	682
	I: Interior Doors/Closets	5	4,540	I: Interior Doors/Closets	5	4,540
	J: Utility Room Renovation/Addition	5	682	J: Utility Room Renovation/Addition	5	682
	K: Sitework, etc.	5	12,492	K: Sitework, etc.	5	12,492
	L: Gutter, etc.	5	2,203	L: Gutter, etc.	5	2,282
	Sub Total of Estimated Cost		235,168	Sub Total of Estimated Cost		235,247

Activities for Year 1	Activities for Year 4 FFY Grant: CA 30 PO 4350 ⁷	1-07		Activities for Year 5 FFY Grant: CA 30 PO 43501-08			
	PHA FY: 2007 Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	PHA FY: 2008 Development Number/Name/General Description Major Work Categories	of Quantity	Estimated Cost	
	CA 043-1A, 1B, 4			CA 043-1A, 1B, 4			
	A: Playground Equipment	1	75,000	A: Enlarge Community Building	1	189,562	
See Annual	B: Landscaping	1	45,000	B: Landscaping	1	50,000	
	C: Off Street Parking	37	75,000	C: Exterior Lighting	1	38,000	
	Sub Total of Estimated Cost		195,000	Sub Total of Estimated Cost		277,562	

Activities for	Activities for Year 2		Activities for Year 3					
Year 1	FFY Grant: CA 30 PO 43501	-05		FFY Grant: CA 30 PO 43501-06				
	PHA FY: 2005			PHA FY: 2006				
	Development Number/Name/General Description of	Quantity	Estimated Cost	Development Number/Name/General Description of	Quantity	Estimated Cost		
	Major Work Categories			Major Work Categories				
	CA 043-2A & 2B			CA 043-2A & 2B				
	NO WORK			NO WORK				
See								
Annual								
Statement								
	Sub Total of Estimated Cost		0	Sub Total of Estimated Cost		0		

Activities for Year 1	Activities for Year 4 FFY Grant: CA 30 PO 43501-07	Activities for Year 5 FFY Grant: CA 30 PO 43501-08				
i eai i	PHA FY: 2007		PHA FY: 2008	01-00		
	Development Number/Name/General Description of Qua	antity Estimated Cost		of Quantity	Estimated Cost	
	Major Work Categories		Major Work Categories			
	CA 043-2A & 2B		CA 043-2A & 2B			
	NO WORK		A: Landscaping	1	20,000	
See Annual			B: Playground Equipment	1	35,000	
Statement			C: Exterior Lighting	1	12,000	
	Sub Total of Estimated Cost	0	Sub Total of Estimated Cost		67,000	

	FY: 2006		
Development Number/Name/General Description of Quantity Estimated Cost Development Number/Name/General Major Work Categories Development Number/Name/General Description of Quantity Estimated Cost Development Number/Name/General Description of Quantity Development Number/Name/General Description Description Development Number/Name/General Description Development Number/Name/General Description Description Development Number/Name/General Description Development Number/Name/General Description Development Number/Name/General Description Development Number/Name/General Development Number/Name/General Description Development Number/Name/General Development Number/Name/General Development Number/Name/General Development Number/Name/General Development Number		Estimated Cost	
CA 043-3			
A: Upgrade HVAC systems 39 163,800 A; Upgrade HVAC Systems	20	126,000	
Annual Statement B: Maintenance Shop (Phase 1) 23 65,000 B: Off Steet Parking		210,980	
C: Playground Area 1 55,000 C: Security Lighing	25	48,000	
D: Fencing 23 55,000			
E: Play Areas 3 32,784			
Sub Total of Estimated Cost 371,584 Sub Total of Estimat	tod Coat	384,980	

Activities for Year 1	FFY Grant: CA 30 PO 43501-07 FFY Grant: CA 30 PO 43501-08 PHA FY: 2007 PHA FY: 2008					
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	of Quantity	Estimated Cost
	CA 043-3			CA 043-3		
	A:Community Center	1	310,099	A: Playground Equipment	3	156,000
See Annual				B: Lighting Exterior	1	79,000
Statement				C: Speed Bumps	5	25,000
				D: Maintenance Shop (Phase 2)	1	48,000
	Sub Total of Estimated Cost		310,099	Sub Total of Estimated Cost		308,000

Activities for	Activities for Year 2			Activities for Year 3		
Year 1	FFY Grant: CA 30 PO 43501-05			FFY Grant: CA 30 PO 43501-06		
	PHA FY: 2005			PHA FY: 2006		
	Development Number/Name/General Description of	Quantity	Estimated Cost	Development Number/Name/General Description of	Quantity	Estimated Cost
	Major Work Categories			Major Work Categories		
	CA 043-10			CA 043-10		
	NO WORK			NO WORK		
See						
Annual						
Statement						
	Sub Total of Estimated Cost		0	Sub Total of Estimated Cost		0

Activities for Year 1	Activities for Year 4 FFY Grant: CA 30 PO 43501-07 PHA FY: 2007			Activities for Year 5 FFY Grant: CA 30 PO 43501-08 PHA FY: 2008			
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	f Quantity	Estimated Cost	
	CA 043-10			CA 043-10			
	A: Bathroom Upgrade	60	85,000	A: Replace Roofs	30	120,000	
See Annual	B: Modify Kitchen Lighting	30	6,000	B: Modify Kitchen Lighting	30	6,000	
	C: Exterior Lighting	20	10,000	C: Remodel Laundry and Expand	1	85,000	
	D: Fix Exterior Walls: Leaking	25	25,000	D: Carpet in Clubhouses	1	6,500	
				E: Replace HVAC Units	62	165,000	
	Sub Total of Estimated Cost		126,000	Sub Total of Estimated Cost	l	382,500	

Activities for Year 1	Activities for Year 2 FFY Grant: CA 30 PO 43501-05			Activities for Year 3 FFY Grant: CA 30 PO 43501-06			
Tour I	PHA FY: 2005	00		PHA FY: 2006	301-00		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of C Major Work Categories	Quantity	Estimated Cost	
	CA 043-13			CA 043-13			
	A: Replacement of Fixed Windows	90	36,000	NO WORK			
See Annual Statement							
	Sub Total of Estimated Cost		36,000	Sub Total of Estimated Cost		0	

Activities for Year 1	Activities for Year 4 FFY Grant: CA 30 PO 4350 ⁻¹ PHA FY: 2007		Activities for Year 5 FFY Grant: CA 30 PO 43501-08 PHA FY: 2008			
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	of Quantity	Estimated Cost
	CA 043-13			CA 043-13		
	A: Install Porches and Sidewalks	30	36,000	A: Install Porches and Sidewalks	30	18,000
See Annual	B: Landscape Rehab and Prune Trees	30	3,000	B: Landscape Rehab and Prune Trees	30	1,500
	C: Install Cloth Lines	30	12,000	C: Install Cloth Lines	30	6,000
	D: Install Ceiling Fans	30	3,750	D: Install Ceiling Fans	30	3,000
	E: Install Screen Doors	45	9,500	E: Install Screen Doors	30	6,000
	F: Install Washer/Dryer Hook-ups in Units	45	89,000	F: More Lighting	30	30,000
				G: Traffic Speed Bumps	30	20,000
				H: Add Extra Phone Line Upstairs	45	8,500
	Sub Total of Estimated Cost		153,250	Sub Total of Estimated Cost		93,000

Activities for Year 1	Activities for Year 2 FFY Grant: CA 30 PO 43501-05	Activities for Year 3 FFY Grant: CA 30 PO 43501-06			
1 oai i	PHA FY: 2005	PHA FY: 2006			
	Development Number/Name/General Description of Qua	entity Estimated Cost	Development Number/Name/General Descriptio	n of Quantity	Estimated Cost
	Major Work Categories	,	Major Work Categories	,	
	CA 043-14		CA 043-14		
	NO WORK		A: Fencing Back Yards	20	15,000
See Annual Statement					
	Sub Total of Estimated Cost	0	Sub Total of Estimated Cost		15,000

Activities for Year 1	FFY Grant: CA 30 PO 43501-07		Activities for Year 5 FFY Grant: CA 30 PO 43501-08		
	PHA FY: 2007	PHA FY: 200			
	Development Number/Name/General Description of Qua Major Work Categories	intity Estimated Cost	Development Number/Name/General Descript Major Work Categories	tion of Quantity	Estimated Cost
	CA 043-14		CA 043-14		
	NO WORK		A: Install Speed Bumps	30	9,500
See Annual			B: Resurface Roads	1	15,000
Statement					
	Sub Total of Estimated Cost	0	Sub Total of Estimated Cost	•	24,500

Activities for	Activities for Year 2		Activities for Year 3			
Year 1	FFY Grant: CA 30 PO 43501-05	5	FFY Grant: CA 30 PO 43501-06			
	PHA FY: 2005	#1 F # 1 1 O 1	PHA FY: 2006	<u></u>		
	Development Number/Name/General Description of Qu	lantity Estimated Cost	Development Number/Name/General Description of Qua	ntity Estimated Cost		
	Major Work Categories		Major Work Categories			
	CA 043-15		CA 043-15			
	NO WORK		NO WORK			
See Annual Statement						
	Sub Total of Estimated Cost	0	Sub Total of Estimated Cost	0		

Activities for Year 1	FFY Grant: CA 30 PO 43501-07			Activities for Year 5 FFY Grant: CA 30 PO 43501-08			
	PHA FY: 2007			PHA FY: 2008			
	Development Number/Name/General Description of C	Quantity	Estimated Cost	Development Number/Name/General Description	n of Quantity	Estimated Cost	
	Major Work Categories			Major Work Categories			
	CA 043-15			CA 043-15			
	NO WORK			A: Re-Surface Roads	1	35,000	
See Annual				B: Speed Bumps	1	12,000	
Statement				C: Playgrounds	1	45,000	
	Sub Total of Estimated Cost		0	Sub Total of Estimated Cost	•	92,000	

Activities for Year 1	for Activities for Year 2 FFY Grant: CA 30 PO 43501-05 PHA FY: 2005			Activities for Year 3 FFY Grant: CA 30 PO 43501-06 PHA FY: 2006		
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description of Major Work Categories	f Quantity	Estimated Cost
	HA-WIDE			HA-WIDE		
	A: Automatic Work Orders/Computer	1	5,824	A: Automatic Work Orders/Computer	1	1,200
See Annual	B: Automatic Inventory System	1	3,000	B: Automatic Inventory System	1	900
	C: Computer Upgrade Hardware	1	80,000	C: Development Communications	1	15,000
	D: Computer Upgrade Software	1	50,000	D: Dev. Preventative Maintenance	1	5,000
	E: Staff Prof. Development Maint.	1	5,000	E: Security for Housing: Lighting	1	58,000
	F: Security for Housing: Lighting	5	10,500	F: Resident Initiatives/Needs etc.	1	2,500
	G. Resident Initiatives/Needs, etc.	1	9,500	G: Computer Upgrade Software	1	59,000
	H: Office Furniture	1	125000	H: Computer Upgrade Hardware	1	95,000
	Sub Total of Estimated Cost		288,824	Sub Total of Estimated Cost		236,600

Activities for Year 1	Activities for Year 4 FFY Grant: CA 30 PO 43501-07 PHA FY: 2007			Activities for Year 5 FFY Grant: CA 30 PO 43501-08 PHA FY: 2008			
	Development Number/Name/General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name/General Description Major Work Categories	of Quantity	Estimated Cost	
	HA-WIDE			HA-WIDE			
	A: Development Communications	1	15,000	A: Development Communications	1	15,000	
See Annual	B: Dev. Preventative Maintenance	1	14,522	B: Dev. Preventative Maintenance	1	14,522	
	C: Security for Housing: Lighting	3	1,500	C: Security for Housing: Lighting	4	15,000	
	D: Resident Initiatives/Needs, etc.	1	5,000	D. Resident Initiatives/Needs, etc.	1	5,000	
	E: Upgrades	1	50,000				
	Sub Total of Estimated Cost		86,022	Sub Total of Estimated Cost	•	49,522	